

Regional Support Teams

Supporting Individuals in Most Integrated Settings

Purpose, Membership, Referral

Information for Training Centers

3-1-13

Office of Developmental Services

Regional Support Teams

- DOJ Settlement
- Role of Regional Support Team (RST)
- Target Population
- Language Equivalencies
- Membership
- Referral Process
- Reporting
- Additional information and contacts

DOJ Settlement - RSTs

“The Commonwealth will create
five Regional Support Teams...”

*from Settlement Agreement signed
August 23, 2012*

SA Section IV. D.3.

Operational March 2013

Role of Regional Support Team

To provide recommendations and assistance in resolving barriers to the most integrated community setting consistent with an individual's needs and informed choice.

SA Section III.E.2. and IV.D.3.

DOJ Target Population

Individuals with ID/DD who:

- Live in training centers
- Meet ID or DD wait list criteria
- Live in a nursing home or ICF

SA Section III. B. 1. a - c.

Language Equivalencies

Case Manager (CM) = Support Coordinator (SC)

Personal Support Team (PST) = Individual
Support Team (IST)

RST Membership

- One in each of 5 regions
- Co-coordinated by CIMs and CRCs
- Includes diverse experience in ID/DD services
- Includes diverse group of professionals with expertise with complex medical and behavioral supports

SA Section IV.D.3.

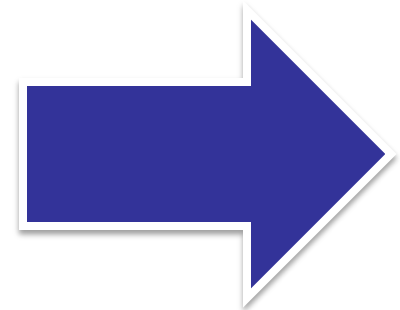
RST Membership*

CIM/CRC Co-Facilitators
OL Specialist
HR Advocate
TC SW Director
START Director
Medical Representative (from TC)
Medical Representative (from community/CSB)
ID Director
SC Supervisor
DD Case Management Provider
Additional experts based on need

*per region

RST Referral Process

RSTs receive referrals from CIMs



TC Social Worker Reasons for referral

a. Recommended to move to a nursing home, ICF or group home with five or more individuals.

b. Difficulty identifying or locating supports within 90 days of discharge plan (year 1); 60 days of discharge plan (year 2); 45 days of discharge plan (year 3); and 30 days of a discharge plan thereafter.

c. PST cannot agree on a discharge plan outcome within 15 days of the annual PST meeting, or within 30 days after the admission to the Training Center.

d-1. Individual or AR opposes moving despite PST recommendation

d-2. Individual or AR refuses to participate in the discharge planning process.

e. Hasn't moved within three months of selecting a provider (requires identifying the barriers to discharge and notifying the facility director and the CIM).

f. Recommended to remain in a Training Center (requires PST/CIM assessment at 90-day intervals).

g. other

SW sends referral form to CIM for reasons a-g

SW updates CIM after additional actions

Return to SW

CIM recommendations

CIM actions

CIM needs RST assistance

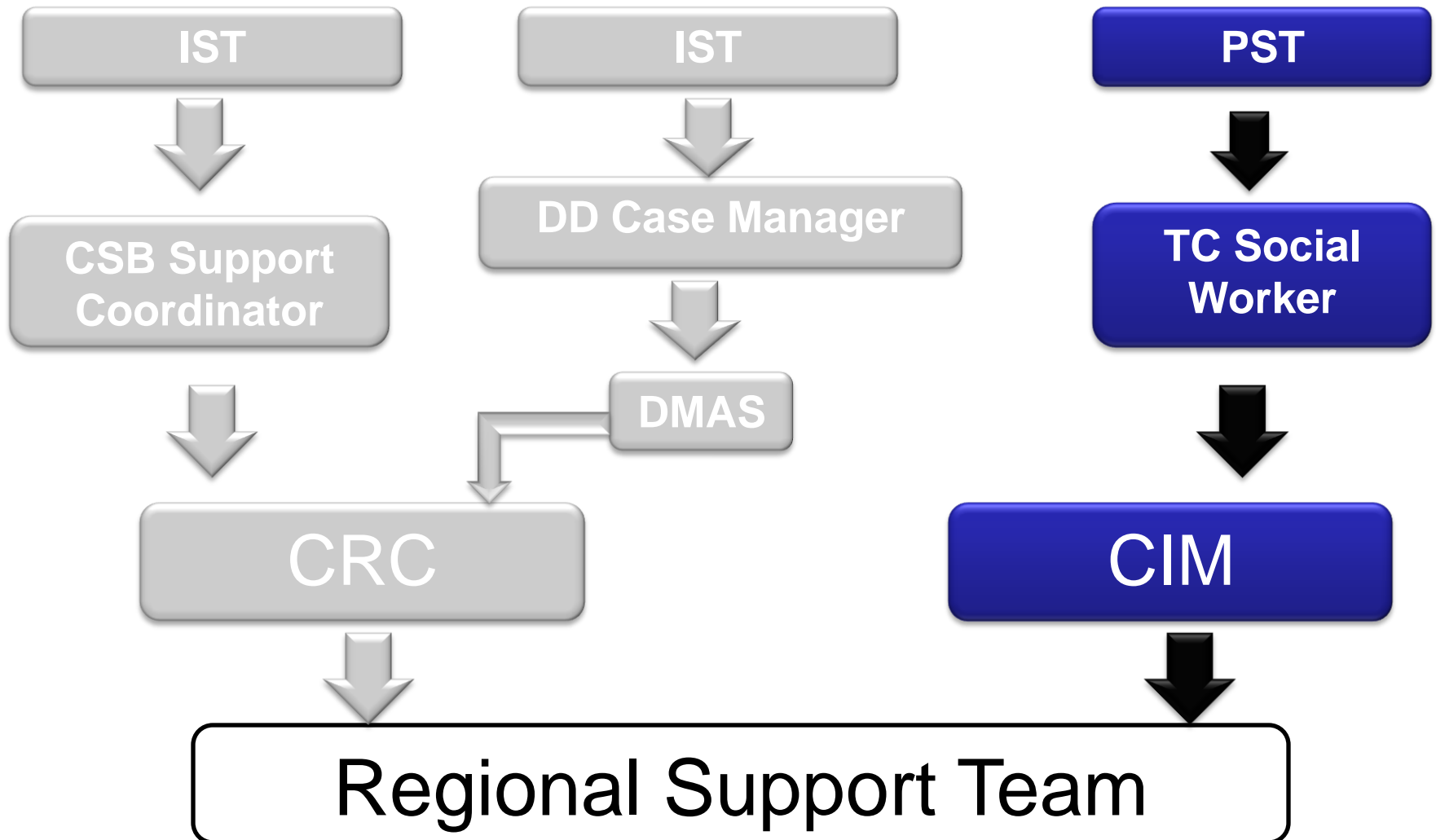
CIM forwards to RST (and notifies PST of meeting date)

CIM (and if requested PST member) present to RST

RST recommendations are made

Training Centers

RST Referral Process



TC Personal Support Teams:

- work to resolve barriers/gaps in services and supports
- assure individuals are informed of choices
- TC Social Workers complete referrals to CIM

SA Section IV.C.5.

Community Integration Managers (CIMs):

- facilitate communication and planning in all aspects of moving from the TC.
- support PSTs in resolving barriers to moving to the community.
- convene RST when needed to resolve issues.

SA Section IV.D.1-2.

Referrals to CIM occurs when:

- a. The PST recommends that an individual be transferred from a Training Center to a nursing home or congregate setting with five or more individuals;

Section IV.D.2.a.

Referrals to CIM occur when:

b. the PST is having difficulty identifying or locating particular types of supports within:

- 90 days of discharge plan (2013)
- 60 days of discharge plan (2014);
- 45 days of discharge plan (2015); and
- 30 days of a discharge plan thereafter.

Section IV. D.2.b.

Referrals to CIM occur when:

c. the PST cannot agree on a discharge plan outcome within 15 days of the annual PST meeting, or within 30 days after the admission to the training center.

Section IV.D.2.c.

Referrals to CIM occur when:

d. the individual or AR opposes moving despite PST recommendation

or

refuses to participate in the discharge planning process.

Section IV.D.2.d.

Referrals to CIM occur when:

e. the individual has not moved within three months of selecting a provider.

- requires PST identifying the barriers to discharge and notifying the facility director and the CIM

Section IV.D.2.e.

Referrals to CIM occur:

f. The PST recommends continued placement in a Training Center.

- requires PST and CIM to assess every 90 days

Section IV.D.2.f.

Referrals to RSTs from CIM occur:

- a. Within 2 weeks of referral when unable to plan steps to resolve barriers to community.

Section IV.D.3.a.

Referrals to RSTs from CIM occur:

b. at the second quarterly review following the PST's recommendation that an individual remain in a Training Center, and at all subsequent quarterly reviews with that recommendation.

Takes effect March 2014.

Section IV.D.3.a.

RST Referral Process

Referrals to RSTs from CIM also occur:

c. when the CIM believes external review is needed to identify additional steps that can be taken to remove barriers to discharge.

Section IV.D.3.c.

Role of Regional Support Team

Notification of RST Referral

The Regional Support Team (RST) will review your selection of services to assure you have received information about all options available to you, especially supports and services in the most integrated settings. The RST is composed of a variety of professionals with expertise serving individuals with developmental disabilities, including individuals with complex behavioral and medical needs. No action is required on your part. Any suggestions the RST offers will be shared with your support coordinator/case manager to be shared with you. If you would like an opportunity to speak with the RST, please let your support coordinator/case manager know.

Please complete the sections below so that the RST may confirm that you have been offered the following opportunities before making your choices.

The following types of residential options were discussed with me (check all that apply):

- ☐ Own Home ☐ Leased Apartment ☐ Family Home ☐ Sponsored Home
☐ Group Home (4 or fewer) ☐ Group Home (5 or more) ☐ ICF
☐ Nursing Home ☐ Training Center ☐ Other: _____

I selected the following options to interview & tour: _____

I have chosen to pursue _____ as my type of residential option.

The following types of employment/day options were discussed with me (check all that apply):

- ☐ Self Employment ☐ Individual Supported Employment ☐ Group Supported Employment
☐ Career Training/Education ☐ Prevocational Services ☐ Day Support
☐ Volunteer ☐ Student ☐ Other: _____

RST Referral Process: Training Centers

Regional Support Team Referral Form Community Integration Manager		
Training Center: <input type="text"/>	Date of request: <input type="text"/>	Unique identifier: <input type="text"/>
Submitted by: <input type="text"/>	Agency: <input type="text"/>	Phone: <input type="text"/>
Referral Reason (check only one)		Issues and actions taken (as applicable):
<input type="checkbox"/> a. Recommended to move to a nursing home, ICF or group home with five or more individuals.	a. Describe the reason(s) for selection and whether the informed choice of provider process has been followed: <input type="text"/>	
<input type="checkbox"/> b. Difficulty finding particular type of community supports within 90 days of discharge plan during 2013.	b. Describe gaps/barriers and what has been tried and learned: <input type="text"/>	
<input type="checkbox"/> c. PST cannot agree on a discharge plan outcome within 15 days of the annual PST meeting, or within 30 days after the admission to the Training Center.	c. Describe difficulty with outcome development and what has been considered? <input type="text"/>	
<input type="checkbox"/> d-1. Individual or AR opposes moving despite PST recommendation <input type="checkbox"/> d-2. Individual or AR refuses to participate in the discharge planning process.	d. Describe the reason(s) for opposition to move and what has been tried and learned: <input type="text"/>	
<input type="checkbox"/> e. Hasn't moved within three months of selecting a provider (requires identifying the barriers to discharge and notifying the facility director and the CIM).	e. Describe the reason(s) for delay in moving and what has been tried and learned: <input type="text"/>	
<input type="checkbox"/> f. Recommended to remain in a Training Center	f. Describe the reason(s) for continued Training Center	

CIM Referral Form

RST Referral Process

Referrals provide information on:

- Individuals preferences & good life
- Supports needed and planned
- Actions taken by PST
- CIM agreement with referral
- Individual/AR informed of choices and opportunities for community integration

RST Referral Process

Members of the PST may be invited by the CIM to assist with team discussions.

RST Actions

- Reviews good life and confirms informed choice.
- Reviews options explored/considers alternatives
- Assures information about community integration and opportunities provided
- Considers individual needs and preferences and most integrated settings

Reporting

RST recommendations and resolutions documented on the referral form by the CIM.

Quantitative data collected by the CIM in the discharge database.

Additional information

<http://www.dbhds.virginia.gov/Settlement.htm>

Questions?

Jae Benz, Director, CI and TC Discharges

(804) 371-5384 Janet.Benz@dbhds.virginia.gov

Community Integration Managers

<http://www.dbhds.virginia.gov/documents/ODS/CIMContactList.pdf>